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Fill in this information to identify your c		
United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:	
	Chapter 7	
	Chapter 11	
	Chapter 12 Chapter 13	Check if this is an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is on government-issued pictur	e Wayne First Name	First Name
identification (for example your driver's license or passport).	Robert Middle Name	Middle Name
. ,	Todd	
Bring your picture identification to your mee	Last Name ing	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First Name	First Name
Include your married or	Middle Name	Middle Name
maiden names.	Last Name	Last Name
3. Only the last 4 digits of your Social Security	xxx - xx - <u>8</u> <u>4</u> <u>5</u> _	xxx - xx
number or federal Individual Taxpayer	OR	OR
Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1	Wayne First Name	Robert Middle Name	Todd Last Name	Case number (if known)	
			About Deb	otor 1:	About Debtor 2 (Spouse Only in a Joint	Case):
-		usiness names mployer	<b>☑</b> I have	e not used any business names or Elf		
	(EIN)	fication Numbers you have used in st 8 years	Business nar	me	Business name	
	Include	e trade names and	Business na	me	Business name	
	doing	business as names	Business nai	me	Business name	
			EIN	·	EIN	· <del></del>
			EIN		EIN	· —
5.	Where	you live			If Debtor 2 lives at a different address:	
				II Rd., Apt. 204		
			Number S	Street	Number Street	
			_		-	
			Addison	IL 60101		
			City	State ZIP Code	City State ZIP Code	
			DuPage County		County	
			the one ab	iling address is different from bove, fill it in here. Note that the end any notices to you at this dress.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the cubil send any notices to you at this mailing address.	ourt
			Number S	Street	Number Street	
			P.O. Box		P.O. Box	
			City	State ZIP Code	City State ZIP Code	
6.		ou are choosing	Check one	:	Check one:	
	this di bankr	istrict to file for uptcy	petitio	the last 180 days before filing this on, I have lived in this district longer on any other district.	Over the last 180 days before filing the petition, I have lived in this district lor than in any other district.	
				e another reason. Explain. 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	
Р	art 2:	Tell the Court	About Your B	ankruptcy Case		
7.		hapter of the uptcy Code you		· ·	Notice Required by 11 U.S.C. § 342(b) for Individual for the Individual for Indi	duals Filing
	are ch under	oosing to file		r 7		
			☐ Chapte	r 11		
			☐ Chapte	r 12		
			— Chapte	r 13		

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Deb	otor 1 Wayne	Robert	Todd	Case number (if known)	
	First Name	Middle Name	Last Name		
8.	How you will pay the fee	court for	more details about how y cash, cashier's check, or	le my petition. Please check with a ou may pay. Typically, if you are part money order. If your attorney is sure a credit card or check with a pre-part of the control of t	aying the fee yourself, you may bmitting your payment on your
			• •	ents. If you choose this option, sigr in Installments (Official Form 103A	
		By law, than 150 fee in in	a judge may, but is not red 0% of the official poverty li stallments). If you choose	(You may request this option only it quired to, waive your fee, and may one that applies to your family size at this option, you must fill out the Aplo3B) and file it with your petition.	o so only if your income is less nd you are unable to pay the
9.	Have you filed for	<b>√</b> No			
	bankruptcy within the last 8 years?	☐ Yes.			
		— District		When	_ Case number
		District		When MM / DD / YYYY	Case number
		District		When MM / DD / YYYY	Case number
10.	Are any bankruptcy	<b>☑</b> No			
	cases pending or being filed by a spouse who is	Yes.			
	not filing this case with you, or by a business	Debtor		Relations	ship to you
	partner, or by an affiliate?	District		When MM / DD / YYYYY	Case number,
		Debtor		Relations	ship to you
		District			Case number,
				MM / DD / YYYY	if known
11.	Do you rent your residence?	Yes. H	o to line 12. las your landlord obtained esidence?	an eviction judgment against you a	nd do you want to stay in your
		] [	No. Go to line 12.  Yes. Fill out Initial Sta	tement About an Eviction Judgmen	t Against You (Form 101A)

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Deb	otor 1	Wayne First Name	Robert Middle N		Todd Last Name	Case number (if known)
ь	art 3:	•			sses You Own as a	Sola Proprietor
	Are you	u a sole proprietor full- or part-time		No.	Go to Part 4.  Name and location of bu	
	busines individu separat	proprietorship is a ss you operate as an lal, and is not a e legal entity such as ration, partnership, or			Name of business, if any  Number Street	
	sole pro	ave more than one oprietorship, use a e sheet and attach it petition.			Health Care Busin Single Asset Real Stockbroker (as de	State ZIP Code  box to describe your business:  less (as defined in 11 U.S.C. § 101(27A))  Estate (as defined in 11 U.S.C. § 101(51B))  efined in 11 U.S.C. § 101(53A))  r (as defined in 11 U.S.C. § 101(6))
Cha <sub>l</sub> Banl are y	Chapte Bankru are you	re you filing under napter 11 of the ankruptcy Code and e you a <i>small business</i>		<i>set ap</i> t rece	opropriate deadlines. If you	the court must know whether you are a small business debtor so that it ou indicate that you are a small business debtor, you must attach your ent of operations, cash-flow statement, and federal income tax return t exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
	debtor	efinition of small		No.	I am not filing under Ch I am filing under Chapte the Bankruptcy Code.	er 11, but I am NOT a small business debtor according to the definition in
		ss debtor, see C. § 101(51D).		Yes.		er 11 and I am a small business debtor according to the definition in the
P	art 4:	Report If You (	Own or	Hav	e Any Hazardous P	roperty or Any Property That Needs Immediate Attention
14.	propert alleged immine	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		No Yes.	What is the hazard?	
	safety?				If immediate attention is	s needed, why is it needed?
	perisha livestoc	ample, do you own ble goods, or ck that must be fed, or ng that needs urgent ?			Where is the property?	Number Street
						City State ZIP Code

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Todd Debtor 1 Wayne Robert Case number (if known) First Name Middle Name Last Name

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one: I received a briefing from an approved credit

**About Debtor 1:** 

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

My physical disability causes me □ Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-16252 Doc 1 Filed 05/13/16 Entered 05/13/16 12:17:30 Desc Main Document Page 6 of 48

Deb	tor 1	Wayne	Robert			Case number (if	know	n)
		First Name	Middle Na	ame Last Name				
Pa	art 6:	Answer These	Questi	ions for Reporting P	urpos	ses		
16.	What k	rind of debts do you	16a.	•	dual pr	sumer debts? Consumer derimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	•	invest	iness debts? Business debition and the operation		e debts that you incurred to obtain e business or investment.
			16c.	State the type of debts y	ou owe	e that are not consumer or bu	sines	s debts.
17.	Are yo	ou filing under er 7?		No. I am not filing unde	r Chap	oter 7. Go to line 18.		
	any ex	o you estimate that after ny exempt property is				•	-	xempt property is excluded and to distribute to unsecured creditors?
	admin	xcluded and dministrative expenses		<b>☑</b> No				
	availal	id that funds will be ble for distribution ecured creditors?		Yes				
18.		nany creditors do stimate that you		1-49 50-99		1,000-5,000 5,001-10,000		25,001-50,000 50,001-100,000
	001			100-199 200-999		10,001-25,000		More than 100,000
19.		nuch do you ate your assets to rth?	$\overline{\square}$	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		nuch do you ite your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Wayne First Name	Robert Middle Name	<b>Todd</b> Last Name	Case number (if known)				
Part 7:	Sign Below							
For you		I have exam and correct.	ined this petition, and I de	eclare under penalty of perjury that the information provided is true				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		connection v	•	ot, concealing property, or obtaining money or property by fraud in n result in fines up to \$250,000, or imprisonment for up to 20 years, 9, and 3571.				
			ne Robert Todd obert Todd, Debtor 1	X Signature of Debtor 2				
		Executed	on 05/13/2016 MM / DD / YYYY	Executed on MM / DD / YYYY				

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Debtor 1	Wayne	Robert	Todd	Case number (if known)
	First Name	Middle Name	Last Name	
represent	attorney, if you are ed by one not represented by	eligibility to prelief availab	roceed under Chapter 7, le under each chapter for	I in this petition, declare that I have informed the debtor(s) about 11, 12, or 13 of title 11, United States Code, and have explained the which the person is eligible. I also certify that I have delivered to I U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies,
an attorney, you do not need to file this page.		` '	• •	an inquiry that the information in the schedules filed with the petition
		2	een L. Ventura of Attorney for Debtor	Date 05/13/2016 MM / DD / YYYY
		Maureer Printed na	n L. Ventura	
		Ventura	Law Office, LLC	
			Calendar Ave.	
		Number Suite 10	Street 2	
		La Gran	ge	IL 60525
		City		State ZIP Code
		Contact p	hone (708) 497-9291	Email address
		6316178 Bar numb		IL

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D. 1		iry your case	and this filing:		
Debtor 1	Wayne	Robert	Todd		
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Lost Norse		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	inkruptcy Court for the:	NORTHERN D	ISTRICT OF ILLINOIS		
Case number				│ │	if this is an
(if known)				ameno	ded filing
000 - 15	4.0.0.A./D				
Official Form					
Schedule A/	/B: Property				12/15
			write your name and case nur ng, Land, or Other Real E	, ,	•
Yes. Wh  1.1.  239 N. Mill Rd. #	-	Check all	ne property? that apply.	Do not deduct secured clai	ims on Schedule D:
		Cin ala	familie banca	Creditors Who Have Claim	s Secured by Property.
oo. aaa. ooo, ii avaii	lable, or other description	Duple:	e-family home x or multi-unit building	Current value of the	Secured by Property.  Current value of the
		Duple:	x or multi-unit building ominium or cooperative	Current value of the entire property?	Current value of the portion you own?
Addison	IL 60101 State ZIP Code	Duple.  Condo	x or multi-unit building	Current value of the	Current value of the
Addison	IL 60101	Duple. Condo	x or multi-unit building ominium or cooperative factured or mobile home tment property	Current value of the entire property?  \$51,600.00  Describe the nature of your content of your content in the entire of your c	Current value of the portion you own? \$51,600.00
Addison City  DuPage	IL 60101	Duple.  Condo Manuf	x or multi-unit building ominium or cooperative factured or mobile home tment property share	Current value of the entire property? \$51,600.00	Current value of the portion you own? \$51,600.00  our ownership ple, tenancy by the
Addison City  DuPage	IL 60101	Duple. Condo Manuf Land Invest Times Other	x or multi-unit building ominium or cooperative factured or mobile home timent property share	Current value of the entire property?  \$51,600.00  Describe the nature of your interest (such as fee simple)	Current value of the portion you own? \$51,600.00  our ownership ple, tenancy by the
Addison City  DuPage	IL 60101	Duple. Condo Manuf Land Invest Times Other	ex or multi-unit building cominium or cooperative factured or mobile home timent property chare	Current value of the entire property? \$51,600.00  Describe the nature of your interest (such as fee simple entireties, or a life estate)	Current value of the portion you own? \$51,600.00  our ownership ple, tenancy by the
Addison City  DuPage County	IL 60101	Duple.  Condo  Manuf  Land  Invest  Times  Other  Who has a Check one	ex or multi-unit building cominium or cooperative factured or mobile home the three	Current value of the entire property? \$51,600.00  Describe the nature of your interest (such as fee simple entireties, or a life estate Fee Simple  Check if this is comm	Current value of the portion you own?  \$51,600.00  our ownership ple, tenancy by the ), if known.
Addison City  DuPage	IL 60101	Duple.  Condo Manuf Land Invest Times Other  Who has a Check one	ex or multi-unit building cominium or cooperative factured or mobile home stment property share  an interest in the property?  e.  or 1 only or 2 only	Current value of the entire property? \$51,600.00  Describe the nature of your interest (such as fee simple) Fee Simple	Current value of the portion you own? \$51,600.00  our ownership ple, tenancy by the ), if known.
Addison City  DuPage	IL 60101	Duple:  Condo Manuf Land Invest Times Other  Who has a Check one Debto Debto	ex or multi-unit building cominium or cooperative factured or mobile home the three	Current value of the entire property? \$51,600.00  Describe the nature of your interest (such as fee simple entireties, or a life estate)  Fee Simple  Check if this is command (see instructions)	Current value of the portion you own?  \$51,600.00  our ownership ple, tenancy by the ), if known.
Addison City DuPage	IL 60101	Duple:    Duple:   Condo   Manuf   Land   Invest   Times   Other   Who has a   Check one   Debto   Debto   At lease   Other info	ex or multi-unit building cominium or cooperative factured or mobile home stment property share  an interest in the property?  a. or 1 only or 2 only  or 1 and Debtor 2 only	Current value of the entire property?  \$51,600.00  Describe the nature of your interest (such as fee simple entireties, or a life estate)  Fee Simple  Check if this is command (see instructions)	Current value of the portion you own? \$51,600.00  our ownership ple, tenancy by the ), if known.
Addison City  DuPage County  PIN-03-29-212-0	IL 60101 State ZIP Code	Duple Condo Manuf Land Invest Times Other Who has a Check one Debto Debto At leas Other info property i	ex or multi-unit building cominium or cooperative factured or mobile home street property share  an interest in the property?  a. or 1 only or 2 only or 1 and Debtor 2 only strone of the debtors and another commation you wish to add about the property or 1 and Debtor you wish to add about the property or 1 and Debtor 2 only strone of the debtors and another commation you wish to add about the property or 1 and Debtor you wish to 2 and 3 and	Current value of the entire property?  \$51,600.00  Describe the nature of your interest (such as fee simple entireties, or a life estate)  Fee Simple  Check if this is command (see instructions)	Current value of the portion you own? \$51,600.00  our ownership ple, tenancy by the ), if known.
Addison City  DuPage County  PIN-03-29-212-0 PIN-03-29-212-0 Parking spot cal	IL 60101 State ZIP Code  20-Condo 083-Parking spot #1	Duple  Condo  Manuf  Land  Invest  Times  Other  Who has a Check one  Debto  Debto  At lead  Other info property i	ex or multi-unit building cominium or cooperative factured or mobile home street property share  an interest in the property?  e.  or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and another commation you wish to add about identification number:	Current value of the entire property?  \$51,600.00  Describe the nature of your interest (such as fee simple entireties, or a life estate)  Fee Simple  Check if this is command (see instructions)  er  ut this item, such as local	Current value of the portion you own?  \$51,600.00  our ownership ple, tenancy by the high second of the pour ownership property

Official Form 106A/B Schedule A/B: Property page 1

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Deb	tor 1	Wayne First Name	Robert Middle Name	Todd Last Name	Case number (if known)	
Pa	art 2:	I	Your Vehicles	Lastrano		
-			•	•	whether they are registered or not? Include Schedule G: Executory Contracts and Unexp	-
3.	Cars, va	ans, trucks, tra	ctors, sport utility vel	nicles, motorcycles		
	✓ No ☐ Yes					
4.		es: Boats, traile	•		chicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories	
5.				•	from Part 2, including any here →	\$0.00
Pa	art 3:	Describe \	our Personal and	l Household Items	<b>i</b>	
Doy	ou own	or have any le	gal or equitable intere	est in any of the follow	ing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		<b>old goods and</b> es: Major applia	l <b>furnishings</b> ances, furniture, linens,	china, kitchenware		
	□ No ✓ Yes	. Describe	Used furnishings a	nd household good	s	\$300.00
7.	Electron Example	es: Televisions		_	quipment; computers, printers, scanners; s, cameras, media players, games	
	□ No ▼ Yes	. Describe	Old computer. Poor	r working condition		\$50.00
8.		•			books, pictures, or other art objects; s, memorabilia, collectibles	
	✓ No ☐ Yes	. Describe				
9.					nt; bicycles, pool tables, golf clubs, skis;	
	✓ No ☐ Yes	. Describe				
10.	Firearm Example		s, shotguns, ammunitio	on, and related equipme	ent	
	<b>☑</b> No	. Describe	5 .			
11.	Clothes Example		othes, furs, leather coa	ats, designer wear, shoe	es, accessories	
	□ No ✓ Yes	. Describe	Used personal clot	hing		\$100.00

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Debt	tor 1	Wayne	Robert	Todd	Case number (if known)	
		First Name	Middle Name	Last Name		
12.	Jewelry Example		ry, costume jewelry	r, engagement rings, we	dding rings, heirloom jewelry, watches, gems,	
	✓ No	. Describe				
13.	Non-far	m animals es: Dogs, cats, bird	s horses			
	✓ No	. Describe	o,			
14.	_	er personal and he	ousehold items y	ou did not already list,	including any health aids you	
	_	. Give specific rmation				
15.					ny entries for pages you have	\$450.00
Pa	art 4:	Describe You	r Financial As	sets	'	
Do y	ou own	or have any legal o	or equitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have petition	e in your wallet, in	your home, in a safe de	posit box, and on hand when you file your	
	✓ No ☐ Yes				Cash:	·
17.	-	-	es, and other simil		s of deposit; shares in credit unions, ave multiple accounts with the same	
	□ No ▼ Yes		Instituti	on name:		
	17.	1. Checking acco	ount: Check	ing account BMO H	arris XXX3410	\$340.00
18.		mutual funds, or p	oublicly traded sto			•
	✓ No ☐ Yes		Institution or issu	er name:		
19.	-	blicly traded stock est in an LLC, part		•	corporated businesses, including	
	info	. Give specific rmation about m	Name of entity:		% of ownership:	
20.	Negotia	ble instruments incl	ude personal chec	ks, cashiers' checks, pr	negotiable instruments omissory notes, and money orders. e by signing or delivering them.	
	info	. Give specific rmation about	Issuer name:			

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Debt		Robert	Todd	Case number (if known)	
	First Name	Middle Name	Last Name		
	Retirement or pension and Examples: Interests in If profit-sharing	RA, ERISA, Keogh, 40	01(k), 403(b), thrift savin	gs accounts, or other pension or	
	<ul><li>✓ No</li><li>✓ Yes. List each account separately.</li></ul>	Type of account:	Institution name:		
		deposits you have ma		tinue service or use from a company ectric, gas, water), telecommunications	
	☑ No ☐ Yes		Institution name or indiv	ridual:	
23.	Annuities (A contract for No	or a specific periodic p	ayment of money to you	, either for life or for a number of years)	
	Yes	Issuer name and	description:		
	Interests in an education 26 U.S.C. §§ 530(b)(1), 5			ogram, or under a qualified state tuition pro	ogram.
	✓ No  ✓ Yes	Institution name a	nd description. Separat	ely file the records of any interests. 11 U.S.C.	§ 521(c)
	Trusts, equitable or fut powers exercisable for		erty (other than anythir	ng listed in line 1), and rights or	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about the</li></ul>	em			
	Patents, copyrights, tra Examples: Internet doma			ual property; and licensing agreements	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about the</li></ul>	em			
	Licenses, franchises, a Examples: Building pern	-	_	on holdings, liquor licenses, professional licens	ses
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about the</li></ul>	em			
Mone	ey or property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to yo	ou			
	<b>☑</b> No				
	Yes. Give specific in about them, including			Federal	: <b>\$0.00</b>
	you already filed the	-		State:	\$0.00
	and the tax years			Local:	\$0.00

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Deb	tor 1	Wayne First Name	Robert Middle Name	Todd Last Name	Case number (if	known)	
29.	Examp		ump sum alimony, spo	ousal support, child s	upport, maintenance, divorce se	ttlement, property	settlement
	✓ No	es. Give specific i	nformation		Ali	mony:	\$0.00
					Ma	aintenance:	\$0.00
					Su	pport:	\$0.00
					Div	vorce settlement:	\$0.00
					Pro	operty settlement	\$0.00
30.			es, disability insurance		benefits, sick pay, vacation pay, ou made to someone else	workers'	
	✓ No	o es. Give specific i	nformation				
31.		sts in insurance poles: Health, disab		health savings accou	unt (HSA); credit, homeowner's,	or renter's insurar	nce
	СО	o es. Name the insu Impany of each po Ind list its value	licy	me:	Beneficiary:	Su	rrender or refund value:
			\$2049.00 T	erm Policy-No Ca	sh Value		\$1.00
32.	If you	are the beneficiary	y that is due you fron of a living trust, experty because someone	ct proceeds from a lif	died e insurance policy, or are curren	tly	
	✓ No	o es. Give specific i	nformation				
33.			arties, whether or not mployment disputes, in	-	vsuit or made a demand for page ghts to sue	yment	
	✓ No	o es. Describe each	claim				
34.		contingent and u	ınliquidated claims of	every nature, inclu	ding counterclaims of the debt	or and	
	✓ No	o es. Describe each	claim				
35.	Any fi	nancial assets yo	ou did not already list				
	✓ No	o es. Give specific i	nformation				
36.					any entries for pages you hav	e →	\$341.00
Pá	art 5:	Describe Any	/ Business-Relate	ed Property You	Own or Have an Interest	In. List any	real estate in Part 1.
37.	Do yo	u own or have an	y legal or equitable i	nterest in any busin	ess-related property?		
		o. Go to Part 6. es. Go to line 38.					

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Deb	tor 1	Wayne	Robert	Todd	Case number (if known)	
	Ī	First Name	Middle Name	Last Name		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.		s receivable or o	commissions you a	ready earned		
	✓ No ☐ Yes.	Describe				
39.		s: Business-rela	hings, and supplies ted computers, softw electronic devices		opiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes.	Describe				
40.	Machine	ery, fixtures, equ	ipment, supplies yo	u use in business, and	tools of your trade	
	✓ No ☐ Yes.	Describe				
41.	Inventor	у				
	✓ No ☐ Yes.	Describe				
42.	Interests	s in partnerships	s or joint ventures			
	✓ No ☐ Yes.	Describe Na	ame of entity:		% of ownership:	
43.	Custome	er lists, mailing l	lists, or other comp	lations		
	✓ No ☐ Yes.	Do your lists in No Yes. Descr		entifiable information(	as defined in 11 U.S.C. § 101(41A))?	
44.	Any bus	iness-related pr	operty you did not a	Iready list		
	✓ No ☐ Yes.	Give specific inf	formation.			
45.					ventries for pages you have	\$0.00
Pa				mercial Fishing-Rel farmland, list it in Pa	ated Property You Own or Have a	n Interest In.
46.	Do you	own or have any	legal or equitable i	nterest in any farm- or o	commercial fishing-related property?	
		Go to Part 7. Go to line 47.				
47	Farm an	imals				Current value of the portion you own? Do not deduct secured claims or exemptions.
41.			ultry, farm-raised fish			
	✓ No ☐ Yes.					

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Deb	tor 1	Wayne	Robert	Todd	Case nu	umber (if known)			
	_	First Name	Middle Name	Last Name					
48.	Crops-	either growing or	harvested						
	✓ No								
		s. Give specific ormation						-	
49.		and fishing equipme	ent, implements, ı	machinery, fixtures	, and tools of trade				
	<b>√</b> No	)							
		es							
50.	Farm a	and fishing supplies	s, chemicals, and	feed					
	<b>√</b> No								
	☐ Ye	·S							
51.	Any fa	rm- and commercia	ا fishing-related	property you did no	t already list				
	✓ No								
	_	s. Give specific ormation							
52.	Add th	e dollar value of all	of your entries fr	om Part 6, includin	g any entries for pages y	you have			
	attach	ed for Part 6. Write	that number here	<b>)</b>		'	→		\$0.00
Pa	art 7:	Describe All Pr	operty You Ov	vn or Have an Ir	nterest in That You [	Did Not List Abo	ve		
	D		4 af am., libral		40				
53.		u have other proper bles: Season tickets,			St?				
	□ No	)							
	<b>☑</b> Ye	s. Give specific info	rmation.						
	M	lonthly rent from	parking space						\$75.00
54.	Add th	e dollar value of all	of your entries fr	om Part 7. Write th	nat number here		<b>→</b>		\$75.00
	7144						-		-
Pa	art 8:	List the Totals	of Each Part o	f this Form					
55.	Part 1:	Total real estate, li	ne 2			'	<b>→</b>		\$51,600.00
56.	Part 2:	: Total vehicles, line	5		\$0.00				
57.	Part 3:	: Total personal and	i nousenoia items	s, line 15	\$450.00				
58.	Part 4:	Total financial ass	ets, line 36		\$341.00				
59.	Part 5:	Total business-rela	ated property, line	e 45	\$0.00				
60.	Part 6:	Total farm- and fis	hing-related prop	erty, line 52	\$0.00				
61.	Part 7:	Total other proper	ty not listed, line	54 .	+ \$75.00				
				ſ		Copy personal			
62.	Total p	personal property.	Add lines 56 thro	ugh 61	\$866.00	property total	<b>&gt;</b>	+	\$866.00
							1		
63.	Total c	of all property on So	chedule A/B. Ad	dd line 55 + line 62				l	\$52,466.00

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Debtor 1 Wayne Robert Todd Case number (if known) Last Name Last Name

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Fill in this info	ormation to ident	ify your	case:				
Debtor 1	Wayne First Name	Robert Middle Name	Todd e Last Name				
Debtor 2							
(Spouse, if filing)	First Name  nkruptcy Court for the:	Middle Name		II I IN	ois		
Case number	inapitoy Court for the.	NONTHE			<u> </u>	Check if this is an amended filing	
(if known)							
Official Form	106C						
Schedule C:	The Property	You Cl	aim as Exem <sub>l</sub>	pt		0	4/16
Using the property space is needed, fi	you listed on Schedul	e A/B: Prop s page as m	erty (Official Form 10	6A/B)	as your source, li	ally responsible for supplying correct informa ist the property that you claim as exempt. If necessary. On the top of any additional page	more
is to state a specific exempted up to the receive certain be exemption of 100% property is determined.	ic dollar amount as one amount of any appoints, and tax-exemply of fair market values	exempt. Al licable stat ot retirement a under a la amount, yo	ternatively, you may tutory limit. Some e nt fundsmay be un w that limits the exe our exemption would	/ clain xemp limite emptic	n the full fair mai tionssuch as th d in dollar amou on to a particular	tion you claim. One way of doing so rket value of the property being lose for health aids, rights to nt. However, if you claim an or dollar amount and the value of the icable statutory amount.	
rait i. ide	ntilly the Property	y Tou Cla	ann as Exempt				
✓ You are o	exemptions are you obtaining state and federal exemptions.	eral nonban	kruptcy exemptions.		if your spouse is a S.C. § 522(b)(3)	filing with you.	
2. For any prope	erty you list on Sche	<i>dule A/B</i> th	at you claim as exe	mpt, f	ill in the informa	tion below.	
•	of the property and li	ne on	Current value of the portion you own		ount of the mption you clain	Specific laws that allow exemption	
			Copy the value from Schedule A/B		ck only one box f h exemption	or	
Brief description: 239 N. Mill Rd. # PIN-03-29-212-00 PIN-03-29-212-00		7	\$51,600.00		\$14,594.00 100% of fair mar value, up to any applicable statut limit	ket	
condo. Property since 1980. CMA		odeled oleted in					
(Subject to ad	ning a homestead execution in the second sec	nd every 3 y	years after that for cas	ses fil		,	

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Robert Todd Debtor 1 Wayne Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$300.00 \$300.00 735 ILCS 5/12-1001(b)  $\overline{\mathbf{Q}}$ Used furnishings and household goods 100% of fair market value, up to any Line from Schedule A/B: 6 applicable statutory limit Brief description: \$50.00 \$50.00 735 ILCS 5/12-1001(b)  $\overline{\mathbf{Q}}$ Old computer. Poor working condition. 100% of fair market value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$100.00 735 ILCS 5/12-1001(a), (e) \$100.00  $\overline{\mathbf{V}}$ **Used personal clothing** 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$340.00 \$340.00 735 ILCS 5/12-1001(b)  $\overline{\mathbf{Q}}$ Checking account BMO Harris XXX3410 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit \$75.00 Brief description: 735 ILCS 5/12-1001(b) \$75.00  $\overline{\mathbf{V}}$ Monthly rent from parking space 100% of fair market value, up to any Line from Schedule A/B: applicable statutory limit

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Fill in this inf	ormation to ide	entify your case:				
Debtor 1	Wayne First Name	Robert Middle Name	Todd Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for th	ne: <b>NORTHERN D</b>	ISTRICT OF ILLING	ois		
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors W	/ho Have Cla	ims Secured b	y Property		12/15
1. Do any credit  No. Che Yes. Fill	additional pages, v	ecured by your properties this form to the control below.	d case number (if kno perty?	t out, number the entri own). hedules. You have noth		
claim, list the creditor has a	creditor separately f particular claim, list ible, list the claims	ditor has more than of or each claim. If mo the other creditors in alphabetical order	ore than one n Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that	\$37,006.00	\$51,600.00	
EMO Harris Ban Creditor's name PO Box 94034 Number Street	ık		Rd. #204 + Parking			
Check if this c	Debtor 2 only the debtors and and claim relates by debt	Continger Unliquida Disputed Nature of lier An agree Statutory Judgmen Judgmen Other (inc	nt ted  n. Check all that applyment you made (such lien (such as tax lien, t lien from a lawsuit cluding a right to offset ple	as mortgage or secured mechanic's lien)	car loan)	
Date debt was inc	urred	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$37,006.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$37,006.00

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Fill in this inf	ormation to iden			
Debtor 1	Wayne First Name	Robert Middle Name	Todd Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	: NORTHERN DIST	RICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

#### Official Form 106E/F

#### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1.	Do any creditors	have priority	unsecured	claims against	you?
----	------------------	---------------	-----------	----------------	------

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

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Debtor 1	Wayne	Robert	Todd	Case number (if known)	
	First Name	Middle Name	Last Name		
	_				
Part 2:	List All of	Your NONPRIORI	TY Unsecured CI	aims	
3. Do a	ny creditors have	nonpriority unsecure	ed claims against you	?	
п	No. You have not	hing to report in this pa	rt. Submit this form to	the court with you other schedules.	
	Yes			•	
<u> </u>					
		•	•	order of the creditor who holds each claim.	
				creditor separately for each claim. For each claim lister	•
, ,		•		ore than one creditor holds a particular claim, list the of out the Continuation Page of Part 2.	ther creditors in
rait	3. Il lilote space is	s needed for nonphonts	unsecureu ciaims, iii	out the Continuation rage of rait 2.	
					Total claim
					i otai otaiiii
4.1					\$9,416.00
لبسا	F		Look 4 dimito of a	account normbox	\$9,410.00
	n Express Creditor's Name		Last 4 digits of a	<del></del>	
PO BOX			When was the de		
Number	Street		As of the date yo	u file, the claim is: Check all that apply.	
			Contingent		
			Unliquidated Disputed		
EL PASC	)	TX 79998	☐ Disputed		
City		State ZIP Code	Type of NONPRIC	ORITY unsecured claim:	
		Check one.			
ت ا	or 1 only or 2 only			ising out of a separation agreement or divorce	
<b>=</b>	or 1 and Debtor 2 o	nlv		ot report as priority claims	
_	ist one of the debto	•	<b>=</b> ~ ~	ion or profit-sharing plans, and other similar debts	
		or a community debt	Other. Specif Credit Card	•	
_	im subject to offse	-	Credit Card		
	iiii subject to ons	GLI			
✓ No ☐ Yes					
4.2					\$11,738.40
AT&T Ur	niversal/Citicard	ls	Last 4 digits of a	ccount number 1 0 6 2	
Nonpriority	Creditor's Name	<u>.                                    </u>	When was the de	<u> </u>	
PO Box					
Number	Street		Contingent	u file, the claim is: Check all that apply.	
			Unliquidated		
			—		
Phoeniz		AZ 85062			
Who incu		State ZIP Code Check one.		ORITY unsecured claim:	
	or 1 only	Official official	Student loans		
	or 2 only			ising out of a separation agreement or divorce ot report as priority claims	
	or 1 and Debtor 2 o	nly	•	ion or profit-sharing plans, and other similar debts	
At lea	st one of the debto	ors and another	Other. Specif		
☐ Chec	k if this claim is fo	or a community debt	Credit Card	•	
_	im subject to offs		2. <b>34.1. 3414</b>		
✓ No	<b>,</b>				
Yes					

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Debtor 1 Wayne Robert Todd Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$26,584.00 Chase Bank USA Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 15298 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Wilmington DF 19850 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? **☑** No Yes П 4.4 \$7.450.00 Citicards/Citibank Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6241 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed Sioux Falls SD 57117 ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? No  $oldsymbol{
olimits}$ Yes П 4.5 \$3,922.00 Last 4 digits of account number Discover Nonpriority Creditor's Name When was the debt incurred? P.O. Box <u>15316</u> As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Wilmington 19850 DE State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Credit Card Is the claim subject to offset? No Yes 

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Wayne Robert Todd Debtor 1 Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.6 \$10,797.00 SYNCB/BP Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 965024 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated ☐ Disputed **ORLANDO** 32896 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No

Yes

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Debtor 1	Wayne	Robert	Todd	Case number (if known)
	First Name	Middle Name	Last Name	<u> </u>
Part 3:	List Other	s to Be Notified Al	oout a Debt That Yo	ou Already Listed
For ex credit debts	xample, if a colle tor in Parts 1 or 2 that you listed in	ction agency is trying 2, then list the collection	to collect from you for on agency here. Simila additional creditors her	kruptcy, for a debt that you already listed in Parts 1 or 2. a debt you owe to someone else, list the original rly, if you have more than one creditor for any of the re. If you do not have additional parties to be notified for
Gateston	e & Co Internat	ional, Inc.	On which entry i	n Part 1 or Part 2 did you list the original creditor?
Name 1000 N West st., Suite 1200 Number Street			Line 4.1 of (	**Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Wilmingto	on	<b>DE 19801</b> State ZIP Code	Last 4 digits of a	ccount number

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Debtor 1	Wayne	Robert	Todd	Case number (if known)	
	First Name	Middle Name	Last Name		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <b>\$0.00</b>
	6b.	Taxes and certain other debts you owe the government	6b. <b>\$0.00</b>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <b>\$0.00</b>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> + <b>\$0.00</b>
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d. <b>\$0.00</b>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <b>\$0.00</b>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <b>\$0.00</b>
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. <b>\$0.00</b>
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> +\$69,907.40
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j. <b>\$69,907.40</b>

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Fill in this inf	ormation to ide	:		
Debtor 1	Wayne First Name	Robert Middle Name	Todd Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for th	ne: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	ormation to	identify your case	:		
Debtor 1	Wayne	Robert	Todd		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
(Spouse, ii iiiiig)	FIISTName	Middle Name	Last Name		
United States Bar	nkruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINOIS	_	
Case number				☐ Check if this is an	
(if known)				amended filing	
				_	
Official Form	106H				
Schedule H:		lebtors			12/15
				Be as complete and accurate as possible. If correct information. If more space is	
needed, copy the	Additional Pag	e, fill it out, and number	er the entries in the boxes of	n the left. Attach the Additional Page to this own). Answer every question.	
•	any codebtors	? (If you are filing a jo	int case, do not list either spo	use as a codebtor.)	
☑ No □ Yes					

include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories

☐ No

Yes

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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i	-ill in this inform	ation to identi	y your case:					
	Debtor 1	Wayne	Robert	Todd				
		First Name	Middle Name	Last Name			Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing
	United States Bankru	intev Court for the	NORTHERN	DISTRICT OF IL	LINOIS			A supplement showing postpetition
	Case number	upicy Court for the.	HORTHERIN	DIOTITION OF IE	LIITOIO			chapter 13 income as of the following date:
	(if known)				_			MM / DD / YYYY
<u>O</u>	fficial Form 10	<u>6l</u>						
S	chedule I: You	ur Income						12/15
resino ab	sponsible for supply clude information ab out your spouse. If our name and case no	ing correct inform out your spouse. more space is nee	ation. If you are If you are separ eded, attach a se Answer every q	e married and not ated and your spo parate sheet to th	filing joi ouse is n	ntly, and yo	our s th ye	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your employ	yment						
	information.  If you have more the	nan one		Debtor 1				Debtor 2 or non-filing spouse
	job, attach a separa	ate page Emplo			Employed			Employed
	with information ab additional employe			✓ Not employ	ed			☐ Not employed
		Occu	oation	Retired				<u> </u>
	Include part-time, s or self-employed w	·	oyer's name					_
	Occupation may in	-iiipi	oyer's address					
	student or homema applies.	aker, if it		Number Street				Number Street
								_
				City	St	ate Zip Code	е	City State Zip Code
		How I	ong employed th	nere?				
ŀ	Part 2: Give D	etails About M	onthly Incom	е				
			-	n. If you have noth	ing to re	port for any	line,	write \$0 in the space. Include your
	n-filing spouse unless			er combine the info	ormation	for all emplo	over	rs for that person on the lines below. If
	u need more space, a			o., ooo	, , , , , , , , , , , , , , , , , , ,		., c.	
					Fo	or Debtor 1		For Debtor 2 or non-filing spouse
2.	List monthly gross payroll deductions) would be.				2.	\$0.0	00_	
3.	Estimate and list r	monthly overtime	рау.		3. +	\$0.0	00	
4.	Calculate gross in	ncome. Add line 2	+ line 3.		4.	\$0.0	00	

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Debt	tor 1	Wayne	Robert	Todd			Case nu	ımbeı	(if know	n)			
		First Name	Middle Name	Last Name		For Debt		F	or Debto	or 2 or	)		
	Сор	y line 4 here		<b>→</b>	4.		\$0.00						
5.	List	all payroll ded	ductions:										
			e, and Social Security deductions	3	5a.		\$0.00						
	5b.	Mandatory co	ontributions for retirement plans		5b.		\$0.00						
	5c.	Voluntary cor	ntributions for retirement plans		5c.		\$0.00						
		-	ayments of retirement fund loans	<b>i</b>	5d.		\$0.00						
	5e.	Insurance			5e.		\$0.00						
	5f.	Domestic sup	pport obligations		5f.		\$0.00						
	5g.	Union dues			5g.		\$0.00						
	_	Other deducti	ions.		- 5	-							
		Specify:			5h. <b>+</b>	·	\$0.00						
6.	<b>Add</b> 5g +		eductions. Add lines 5a + 5b + 5	c + 5d + 5e + 5f +	6.		\$0.00						
7.	Cald	culate total mo	onthly take-home pay. Subtrac	t line 6 from line 4.	7.		\$0.00						
8.	List	all other incor	me regularly received:										
		Net income fr	om rental property and from ope ofession, or farm	rating a	8a.		\$0.00						
		gross receipts	ment for each property and busines , ordinary and necessary business hly net income.	•									
	8b.	Interest and o	dividends		8b.		\$0.00						
	8c.		ort payments that you, a non-filing gularly receive	g spouse, or a	8c.		\$0.00						
			ny, spousal support, child support, r ment, and property settlement.	maintenance,									
	8d.	Unemployme	nt compensation		8d.		\$0.00						
	8e.	Social Securi	ty		8e.	-	\$0.00						
	8f.	Other govern	ment assistance that you regular	ly receive		-							
		cash assistan	assistance and the value (if known) ce that you receive, such as food ser the Supplemental Nutrition Assistations ides.	tamps									
		Specify:			8f.		\$0.00						
	8g.	Pension or re	tirement income		8g.		\$0.00						
	8h.	Other monthly			0.1								
		Specify: Par	king spot rental		8h. 🛊		<u>\$75.00</u>						
9.	Add	all other inco	me. Add lines 8a + 8b + 8c + 8d +	8e + 8f + 8g + 8h.	9.		\$75.00						
10.			income. Add line 7 + line 9. ine 10 for Debtor 1 and Debtor 2 or	non-filing spouse.	10.		\$75.00	+			=[	\$7	5.00
11.	Inclu frien	ude contribution nds or relatives.	ular contributions to the expense as from an unmarried partner, mem amounts already included in lines 2	bers of your househ	old, yo	our depen						e J.	
	Spe	cify:								11.	+	\$(	0.00
12.	Add	the amount in	the last column of line 10 to the	amount in line 11.	The re	esult is the	e combin	ed m	onthly	12.		\$7!	5.00
	Add the amount in the last column of line 10 to the amount in line 11. income. Write that amount on the Summary of Your Assets and Liabilities if it applies.					Certain Sta	atistical I	nform	ation,		Co	mbined	
												nthly in	come
13.	Do y	you expect an	increase or decrease within the	year after you file th	nis for	m?							
	$\Box$	No. Yes. Explain:	Debtor receives \$1753.90 a r	month in social se	ecurit	y incom	ne.						

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G	ill in this inform	ation to identi	fy your case:			Cha	ck if this	io:	
	Debtor 1	Wayne	Robert	Todd				nded filing	
		First Name	Middle Name	Last Nar	me			ement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me		chapter	13 expenses as g date:	s of the
	United States Bankro	uptcy Court for the	: NORTHERN DI	STRICT OF	ILLINOIS		MM / DE	) / YYYY	_
	Case number (if known)								
Of	fficial Form 10	6J							
So	chedule J: Yo	ur Expense	S						12/15
naı	rrect information. If me and case numbe	more space is no	le. If two married pe eeded, attach anothe swer every question.	er sheet to th		_		-	
1.	Is this a joint case		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
2.	✓ No. Go to line  ✓ Yes. <b>Does D</b>	e 2.  ebtor 2 live in a so  Debtor 2 must fil	eparate household? le Official Form 106J- No		for Separate Housel	nold of	f Debtor 2	2.	
	Do not list Debtor 1 Debtor 2.	ä	Yes. Fill out this inf for each dependent		Dependent's relation Debtor 1 or Debtor		•	Dependent's age	Does dependent live with you?
	Do not state the de names.	pendents'							Yes No Yes No Yes No Yes No Yes No No No No
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						- ∐ Yes
:	art 2: Estima	te Your Ongoi	ing Monthly Exp	enses					
to	timate your expense	es as of your bank of a date after the	kruptcy filing date u e bankruptcy is filed	nless you ar					
			h government assis n Schedule I: Your Ir	-				Your expens	es
4.			enses for your resid any rent for the groun				4		\$300.00
	If not included in I	ine 4:							
	4a. Real estate ta	xes					4	a	\$60.00
	4b. Property, hom	eowner's, or rente	r's insurance				4	b	\$25.00
	4c. Home mainter	nance, repair, and	upkeep expenses				4	c	\$25.00
	4d. Homeowner's	association or cor	ndominium dues				4	d	\$267.00

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Debtor 1 Wayne Robert Todd Case number (if known) Middle Name Last Name First Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6. 6a. Electricity, heat, natural gas 6a. \$75.00 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and 6c. \$175.00 cable services 6d. 6d. Other. Specify: 7. Food and housekeeping supplies 7. \$450.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$30.00 11. Medical and dental expenses 11. \$350.00 12. Transportation. Include gas, maintenance, bus or train 12. \$100.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. magazines, and books 14. Charitable contributions and religious donations 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$30.00 15b. Health insurance 15b. \$45.00 15c. Vehicle insurance 15c. 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

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Deb	tor 1	Wayne	Robert	Todd	Case number (if knowr	n)
		First Name	Middle Name	Last Name		
20.		er real property e edule I: Your Inco		lines 4 or 5 of this form or	on	
	20a.	Mortgages on c	other property		20a.	
	20b.	Real estate tax	es		20b.	
	20c.	Property, home	eowner's, or renter's insurar	nce	20c.	
	20d.	Maintenance, r	epair, and upkeep expense	es	20d.	
	20e.	Homeowner's a	association or condominiun	n dues	20e.	
21.	Othe	er. Specify:			21.	<b>+</b>
22.	Calc	culate your montl	hly expenses.			
	22a.	Add lines 4 thro	ough 21.		22a. <b>-</b>	\$1,982.00
	22b.	Copy line 22 (n	nonthly expenses for Debte	or 2), if any, from Official For	rm 106J-2. 22b.	
	22c.	Add line 22a ar	nd 22b. The result is your	monthly expenses.	22c.	\$1,982.00
23.	Calc	culate your montl	hly net income.		_	
	23a.	Copy line 12 (y	our combined monthly inco	ome) from Schedule I.	23a.	\$75.00
	23b.	Copy your mon	othly expenses from line 22	c above.	23b. <b>-</b>	\$1,982.00
	23c.		nonthly expenses from you our monthly net income.	ır monthly income.	23c.	(\$1,907.00)
24.	Do y	ou expect an inc	crease or decrease in yo	ur expenses within the yea	ır after you file this form?	
			, , ,	your car loan within the year modification to the terms of y	or do you expect your mortgage your mortgage?	
		Yes. Explain her None.	re:			

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Fill in this in	formation to ide			
Debtor 1	Wayne First Name	Robert Middle Name	<b>Todd</b> Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for th	e: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

sch	edules after you file your original forms, you must fill out a new Summary and check the box at the top of this	page.
P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$51,600.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$866.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$52,466.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$37,006.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$69,907.40
	Your total liabilities	\$106,913.40
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$75.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,982.00

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Debtor 1		Wayne	Robert	Todd	Case number (if known)
		First Name	Middle Name	Last Name	
P	art 4:	Answer Th	nese Questions fo	r Administrative ar	nd Statistical Records
6.	Are yo	ou filing for bank	ruptcy under Chapter	s 7, 11, or 13?	
		o. You have not es	hing to report on this pa	rt of the form. Check th	is box and submit this form to the court with your other schedules.
7.	What k	kind of debt do y	ou have?		
		•	•		e those "incurred by an individual primarily for a personal, 3-9g for statistical purposes. 28 U.S.C. § 159.
			ot primarily consumer urt with your other sche		ng to report on this part of the form. Check this box and submit
8.				y Income: Copy your to Line 11; <b>OR</b> , Form 1220	tal current monthly income from C-1 Line 14. \$75.00
^	Convi	ho following on	anial antogorian of ala	ime from Bort 4 line 6	of Schodulo E/E:

**Total claim** 

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$0.00

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		Doc	ument Paţ	ye 35 01 48		
Fill in this info	ormation to i	dentify your case:				
Debtor 1	Wayne First Name	Robert Middle Name	Todd Last Name			
Debtor 2 (Spouse, if filing)	Firet Name	Middle Name	Last Name			
		the: NORTHERN D		NOIS		
Case number (if known) Check if this is an amended filing						
	Official Form 106Dec  Declaration About an Individual Debtor's Schedules 12/15					
If two married peo	ple are filing tog	ether, both are equal	ly responsible for s	supplying correct information.		
You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to 1250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						

V	INO		
П	Yes.	Name of person	Attach Bankruptcy Petition Preparer's Notice,
		-	Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Χ	/s/ Wayne Robert Todd	X
	Wayne Robert Todd, Debtor 1	Signature of Debtor 2
	Date 05/13/2016 MM / DD / YYYY	Date MM / DD / YYYY

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F	ill in this inf	ormation to ic	lentify your case:					
D	ebtor 1	Wayne First Name	Robert Middle Name	Todd Last Name				
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				
	nited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
1 -	ase number known)						Check if this is an amended filing	
Of	ficial Form	107						
	Statement of Financial Affairs for Individuals Filing for Bankruptcy							
cor you	rect informatio	on. If more space use number (if kn		separate sheet to the question.	is form. On	the top of any a	sponsible for supplying dditional pages, write	
1.	What is your  ☐ Married ☑ Not marrie	current marital s	tatus?					
2.	During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
3.	Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?  (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)							,
	✓ No ☐ Yes. Mak	e sure you fill out	Schedule H: Your Cod	debtors (Official Forr	n 106H).			

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Deb	otor 1	Wayne First Name	Robert Middle Name	Todd Last Name	Case nu	mber (if known)		
P	art 2:	Explain the So	ources of Y	our Income				
4.	Fill in th	ne total amount of inc	ome you rece	ment or from operating a vived from all jobs and all b income that you receive to	ousinesses, including par	t-time activities.	calendar years?	
	✓ No	s. Fill in the details.						
5.	Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.							
	List ead	ch source and the gro	ss income fro	om each source separately	. Do not include income	that you listed in line 4.		
	□ No ☑ Ye	s. Fill in the details.						
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
Fro	m .lanua	ary 1 of the current v	ear until	Social Security	\$8,769.00			
From January 1 of the current year until the date you filed for bankruptcy:			Parking Rent	\$375.00				
For the last calendar year: (January 1 to December 31, 2015)  YYYYY			Social Security	\$21,046.00				
		1 to December 31, <b>2015</b> )		Parking Rent	\$900.00			
For the calendar year before that: (January 1 to December 31, 2014)		at:	Social Security	\$21,046.00				
			Parking Rent	\$900.00				

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Deb		Wayne	Robert	Todd	Case number (if known)			
		First Name	Middle Name	Last Name				
P	art 3:		-		ı Filed for Bankruptcy			
<b>3</b> .	Are eith	er Debtor 1	I's or Debtor 2's debts pri	imarily consumer de	bts?			
	☐ No.	No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
		During th	ne 90 days before you filed	for bankruptcy, did yo	ou pay any creditor a total of \$6,425* or more?			
		□ No. 0	Go to line 7.					
		☐ Yes.	total amount you paid that	creditor. Do not inclu	al of \$6,425* or more in one or more payments and the ude payments for domestic support obligations, such as payments to an attorney for this bankruptcy case.			
		* Subject	t to adjustment on 4/01/19	and every 3 years aft	er that for cases filed on or after the date of adjustment.			
	✓ Yes.	Debtor 1	or Debtor 2 or both have	primarily consume	debts.			
		During th	ne 90 days before you filed	for bankruptcy, did yo	ou pay any creditor a total of \$600 or more?			
		<b>☑</b> No. (	Go to line 7.					
		Yes.		ayments for domestic	al of \$600 or more and the total amount you paid that support obligations, such as child support and alimony. r this bankruptcy case.			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.							
	✓ No ☐ Yes.	. List all pa	yments to an insider.					
3.		year befored an inside	•	y, did you make any	payments or transfer any property on account of a debt that			
	Include p	payments o	n debts guaranteed or cosi	igned by an insider.				
	✓ No ☐ Yes.	. List all pa	yments that benefited an ir	nsider.				
		من بنا						
Pa	art 4:	Identify	Legal Actions, Repo	ossessions, and	Foreclosures			
9.	List all s	uch matters			in any lawsuit, court action, or administrative proceeding? ctions, divorces, collection suits, paternity actions, support or custody			
	✓ No ☐ Yes.	. Fill in the	details.					

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Deb	otor 1	Wayne First Name	Robert Middle Name	Todd Last Name	Case number (if k	nown)			
10.	seized,	1 year before yo or levied?		otcy, was any of your pro	operty repossessed, foreclose	d, garnished, attach	ed,		
		Go to line 11. s. Fill in the inforr	mation below.						
11.	. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?								
	✓ No ☐ Yes	s. Fill in the detai	ls.						
12.				otcy, was any of your pro ustodian, or another offi	operty in the possession of an cial?	assignee for the be	nefit of		
	☑ No □ Yes	<b>3</b>							
P	art 5:	List Certain	Gifts and Cor	tributions					
13.	Within	2 years before y	ou filed for bankru	ıptcy, did you give any g	ifts with a total value of more t	than \$600 per perso	n?		
	✓ No	s. Fill in the detai	ls for each gift.						
14.	14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?								
	☑ No □ Yes	s. Fill in the detail	ls for each gift or co	ontribution.					
P	art 6:	List Certain	Losses						
15.		1 year before yo isaster, or gamb		otcy or since you filed fo	r bankruptcy, did you lose any	thing because of th	eft, fire,		
	✓ No ☐ Yes	s. Fill in the detail	ls.						
P	art 7:	List Certain	Payments or	Transfers					
16.	anyone	you consulted a	about seeking ban	kruptcy or preparing a b			•		
	Include	any attorneys, ba	ankruptcy petition p	reparers, or credit counse	ling agencies for services require	ed for your bankrupto	cy.		
	□ No ✓ Yes	s. Fill in the detail	ls.						
	ureen L	. Ventura /as Paid		•	of any property transferred y fees, including \$335	Date payment or transfer was made	Amount of payment		
106 Num		endar Ave. #10	)2			05/11/2016	\$1,950.00		
		, IL 60525					_		
City		Sta	te ZIP Code						
Ema	il or websi	te address							
Dari	on \//bc *	lada tha Daymant if	Not Vou	-					

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Debto	or 1 Wayne First Name		Robert Middle Name	Todd Last Name	Case number (if k	nown)	
	Advising n Who Was Paid			Description and value of a Pre-BK Credit Counseli		Date payment or transfer was made	Amount of payment
703	Washington Ave	<b>)</b> .				5/3/2016	\$9.76
Numb	er Street			•			
STE	200						-
Bay Citv	City	MI State	<b>48708</b> ZIP Code				
O.,,		Clairo	0000				
Email	or website address						
Person	n Who Made the Payr	nent, if Not	i You				
;	anyone who prom	nised to h	nelp you deal w	otcy, did you or anyone else ith your creditors or to mak	• • • • • •		perty to
	Do not include any	payment	t or transfer that	you listed on line 16.			
	☑ No ☐ Yes. Fill in the	details.					
	•	-		ıptcy, did you sell, trade, or se of your business or finan		perty to anyone, ot	her than
	ū			made as security (such as grave already listed on this stat	,	or mortgage on your	property).
	☑ No ☐ Yes. Fill in the	details.					
				ruptcy, did you transfer any called asset-protection device		ust or similar devic	e of which
	☑ No ☐ Yes. Fill in the	details.					
Pa	rt 8: List Ce	rtain F	inancial Acc	ounts, Instruments, Sa	afe Deposit Boxes, and	l Storage Units	
	Within 1 year befo benefit, closed, so	-	-	otcy, were any financial acco	ounts or instruments held i	n your name, or for	your
	•	•	•	or other financial accounts; ce ciations, and other financial in	• •	n banks, credit union	s, brokerage
	☑ No ☐ Yes. Fill in the	details.					

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Deb	otor 1	Wayne	Robert	Todd	Case number (if known)
24	Da waw	First Name	Middle Name	Last Name	d far bankruntau anv oofs danseit bay ar ather danseitaur
21.	-	urities, cash, or otl		year before you me	d for bankruptcy, any safe deposit box or other depository
	<b>⋈</b> No				
		s. Fill in the details.			
22.	Have y	ou stored property	in a storage unit o	or place other than	your home within 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	s. Fill in the details.			
		•			
	art 9:			or Control for S	
23.	-	hold or control an in trust for someo		meone else owns?	Include any property you borrowed from, are storing for,
	<b>☑</b> No				
	☐ Yes	s. Fill in the details.			
Ρ	art 10:	Give Details	About Environr	mental Informat	ion
For	the purp	oose of Part 10, the	e following definition	ons apply:	
•	Environn	mental law means	any federal, state,	or local statute or	regulation concerning pollution, contamination, releases of
				•	nd, soil, surface water, groundwater, or other medium, e substances, wastes, or material.
		-		as defined under a including disposal	ny environmental law, whether you now own, operate, or sites.
				onmental law defin ntaminant, or simila	es as a hazardous waste, hazardous substance, toxic ır item.
Rep	ort all n	otices, releases, aı	nd proceedings tha	at you know about,	regardless of when they occurred.
24.	Has any	y governmental un	it notified you that	you may be liable	or potentially liable under or in violation of an environmental
	✓ No ☐ Yes	s. Fill in the details.			
25.	Have y	ou notified any gov	vernmental unit of	any release of haza	ardous material?
	✓ No ☐ Yes	s. Fill in the details.			
26.	Have you		any judicial or adn	ninistrative proceed	ling under any environmental law? Include settlements and
	☑ No	<b>-</b>			
	☐ Yes	s. Fill in the details.			

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Debtor 1		Wayne	Robert	Todd	Case number (if known)
		First Name	Middle Name	Last Name	
P	art 11:	Give Detai	ls About Your Bu	siness or Connec	tions to Any Business
27.	Within busines	-	you filed for bankrupt	cy, did you own a bus	iness or have any of the following connections to any
		A member of a A partner in a An officer, dire	a limited liability compar	ny (LLC) or limited liabi	
			ove applies. Go to Par apply above and fill in		ach business.
28.		-	you filed for bankrupt s, creditors, or other		ncial statement to anyone about your business? Include
	□ No □ Yes	s. Fill in the deta	ails below.		
P	art 12:	Sign Belov	N		
that pro	answer	s are true and of fraud in conne	correct. I understand	that making a false st	attachments, and I declare under penalty of perjury atement, concealing property, or obtaining money or ines up to \$250,000, or imprisonment for up to 20 years,
X /	s/ Wayı	ne Robert Tod	ld	X	
-		obert Todd, Deb		Signature of D	Debtor 2
I	Date	05/13/2016		Date	
Did	you atta	ch additional p	ages to Your Stateme	nt of Financial Affairs	for Individuals Filing for Bankruptcy (Official Form 107)?
بخا	No Yes				
Did	you pay	or agree to pay	y someone who is not	an attorney to help y	ou fill out bankruptcy forms?
		me of person			Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).

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Fill in this info	Fill in this information to identify your case:					
Debtor 1	Wayne First Name	Robert Middle Name	Todd Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLINOI			
Case number (if known)						

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

1.	For any creditors that you listed in Part 1 of <i>Schedule D: Creditors Who Hold Claims Secured by Property</i> (Official Form 106D), fill in the information below.									
	Identify the cre	editor and the property that is collateral		at do you intend to do with the perty that secures a debt?		you claim the property exempt on Schedule C?				
	Creditor's name:	BMO Harris Bank		Surrender the property.  Retain the property and redeem it.		No Yes				
	Description of property securing debt:	239 N. Mill Rd. #204 + Parking spot		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: <b>Debtor will continue making pay</b>	men	ts to creditor without				

reaffirming.

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

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Debtor 1	Wayne	Robert	Todd	Case number (if known)
	First Name	Middle Name	Last Name	
Part 3:	Sign Below			
		I declare that I have subject to an unexp	•	about any property of my estate that secures a debt and
X /s/ Way	yne Robert Todd		Χ	
Wayne	Robert Todd, Debto	or 1	Signature of Del	otor 2
Date (	05/13/2016		Date	
N	MM / DD / YYYY		MM / DD	/ YYYY

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B2030 (Form 2030) (12/15)

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

in re	wayne Robert Todd C	ase No.	
	C	hapter	7
	DISCLOSURE OF COMPENSATION OF ATTORNE	Y FOR	DEBTOR
tha ser	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the atto t compensation paid to me within one year before the filing of the petition in bankr vices rendered or to be rendered on behalf of the debtor(s) in contemplation of or as follows:	uptcy, or a	agreed to be paid to me, for
Foi	r legal services, I have agreed to accept	\$1	,950.00
Pri	or to the filing of this statement I have received	\$1	,950.00
	ance Due		
2. The	e source of the compensation paid to me was:		
	✓ Debtor		
3. The	e source of compensation to be paid to me is:		
	☐ Other (specify)		
4. 🔽	I have not agreed to share the above-disclosed compensation with any other pe associates of my law firm.	rson unle:	ss they are members and
	I have agreed to share the above-disclosed compensation with another person of associates of my law firm. A copy of the agreement, together with a list of the nation compensation, is attached.		
5. In r	return for the above-disclosed fee, I have agreed to render legal service for all asp	ects of the	e bankruptcy case, including:
	Analysis of the debtor's financial situation, and rendering advice to the debtor in d nkruptcy;	etermining	g whether to file a petition in
b.	Preparation and filing of any petition, schedules, statements of affairs and plan wh	nich may b	pe required;
C.	Representation of the debtor at the meeting of creditors and confirmation hearing,	and any	adjourned hearings thereof;
d.	[Other provisions as needed]		
rea	gotiations with secured creditors to reduce to market value; exemption plan iffirmation agreements and applications as needed; preparation and filing of (A) for avoidance of liens on household goods. Fee includes file fee.		

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/13/2016 /s/ Maureen L. Ventura

Date Maureen L. Ventura

Ventura Law Office, LLC 106 W. Calendar Ave. Suite 102

La Grange, IL 60525

Phone: (708) 497-9291 / Fax: (651) 202-4470

Bar No. 6316178

/s/ Wayne Robert Todd

Wayne Robert Todd

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Wayne Robert Todd CASE NO

CHAPTER 7

# **VERIFICATION OF CREDITOR MATRIX**

The above named	d Debtor hereby verifie	es that the attached	d list of creditors	is true and correc	ot to the best of	his/her
knowledge.						

Date	5/13/2016	Signature _/s/ Wayne Robert Todd
		Wayne Robert Todd
Date		Signatura
Date		Signature

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American Express PO BOX 981537 EL PASO, TX 79998

AT&T Universal/Citicards PO Box 78045 Phoeniz, AZ 85062

BMO Harris Bank PO Box 94034 Palatine, IL 60094

Chase Bank USA P.O. Box 15298 Wilmington, DE 19850

Citicards/Citibank P.O. Box 6241 Sioux Falls, SD 57117

Discover P.O. Box 15316 Wilmington, DE 19850

Gatestone & Co International, I: 1000 N West st., Suite 1200 Wilmington, DE 19801

SYNCB/BP PO BOX 965024 ORLANDO, FL 32896